

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Facility Information**

**Facility Name:** WOODLAND COURT ELDER SERVICES LLC II (0009754)

**Address:** 1102 SOUTH CENTER AVENUE #2, MERRILL, WI 54452

**License Status:** REGULAR

**Licensed/Certified/Registered** 09/01/2003

**Regional Office:** NORTHERN REGION (RHINELANDER), (715) 365-2800

**Survey History**

**Survey ID:** 0096482      **End Date:** 02/10/2006      **Type:** OTHER      **Purpose:** COMPLAINT/SELF REPORT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10009520    Served 03/09/2006

Deficiencies Cited

83.21(4)(g)

83.42(3)(d)

Subject Area

FAIR TREATMENT

STAFF TRAINED IN EMERGENCY PLAN

Compliance  
Verified

Corrected

**Survey ID:** 0095527      **End Date:** 08/24/2005      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0091869      **End Date:** 01/02/2004      **Type:** OTHER      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0090864      **End Date:** 08/19/2003      **Type:** STANDARD      **Purpose:** SURVEY/SELF REPORT

**Results:** LICENSE/CERT/REGISTRATION ISSUED

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Complaint History**

**Date Complaint Received: 08/19/2005**

**Date Investigation Completed: 02/10/2006**

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE  
ADMINISTRATION  
PROGRAM SERVICES

Result

SUBSTANTIATED  
SUBSTANTIATED  
SUBSTANTIATED

SOD #

10009520  
NOF  
NOF

**Date Complaint Received: 12/02/2003**

**Date Investigation Completed: 01/02/2004**

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE  
STAFF ADEQUACY

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

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